



Cognitive Impairment

& the Implications for Substance Abuse Treatment

8 CEHs Online Course



Mountain West
ATTC

Unifying science, education
and services to transform lives.

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Objectives

- Increase your understanding of the different structures and functions of the brain;
- Raise your awareness of how drugs of abuse impact cognitive systems;
- Generate understanding of the types of impairments which occur and the implications for treatment
- Increase understanding of the types of modifications which need to be made to treatment protocols to increase client retention and success.

Dates

May 3 - May 28, 2010

Length

4 weeks

Cost

\$40.00 **No refunds.**

Online Course Details (8 CEHs)

Enrollment: First come-first serve

Enrollment limit: 25 Maximum (No waiting list.)

Instructor: Barbara Sullivan, Ph.D.

Contact Hours: 8 (Must complete all coursework to receive a passing grade/certificate. No partial hours may be earned.)

Certificate:

Certificate will be mailed to address on form to those who pass all coursework. No partial CEHs are available.

Instructor is responsible for grading and all grades are Pass/Fail. This course is worth 8 contact hours. NAADAC #00259.

Registration Deadline:

April 28, 2010

This course is sponsored by the Mountain West ATTC, and is offered to professionals working in substance abuse treatment and the related fields in the MWATTC region. MWATTC regional professionals will be given preference.

Registrant Information (continue on next page)

Name of Registrant: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Fax: (____) _____

Work Phone: (____) _____ Email: _____

Please indicate which state you currently work in (check all that apply):

☐ CO ☐ ID ☐ NV ☐ MT ☐ UT ☐ WY Other: _____

FAX THIS REGISTRATION TO JULIE TIEMAN 775.784.1840 OR EMAIL JTIEMAN@CASAT.ORG.



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Payment Information

Payment Type: ☐ Credit Card ☐ Check (Make check payable to: **Board of Regents**)

Name on Card: _____

Credit Card Number: _____

Expiration Date: _____ Billing Zip: _____

Card Security Code: _____

Cost

\$40.00 **No refunds.**

Confirmation

A confirmation will be sent with information on how to access the online course by April 26, 2010, or as soon as the registrations are received.

INSTRUCTIONS

FAX OR EMAIL THIS FORM TO JULIE TIEMAN AT:

775.784.1840

OR

JTIEMAN@CASAT.ORG

FOR PAYMENT BY CHECK, MAIL TO:

UNIVERSITY OF NEVADA, RENO

ATTN: JULIE TIEMAN

800 HASKELL, FIRST FLOOR

RENO, NV 89509